

RECEIVED

SEP 11 2013

State of West Virginia
Purchasing DivisionDIVISION OF TOURISM
ADMINISTRATION**AGREEMENT**Purchase Order # 4620

WVFIMS Account # _____

TEAM Vendor # _____

WVFIMS Vendor # 558412

I, Old White Charities, Inc., agree to perform the following services
 for WV Division of Tourism at 90 MacCorkle Ave., SW, South Chas. WV
(Agency) (Name and address) (Location)
Fulfilment of sponsorship and hospitality services rendered.
(Detailed description of services to be performed)

Date(s) of Service: from July 1, 2013 to October 31, 2013The rate of pay shall be _____ per _____ not to exceed
\$ 890,000 for the entire term of the contract.

NOTE: Any anticipated travel must be incorporated into the vendor's fee. No travel will be reimbursed by the State and is the sole responsibility of the vendor. The following certification must be completed and signed if the vendor is a full-time employee of the State of West Virginia.

Please check the appropriate box below:

- I am not currently a full-time employee of the State of West Virginia;
 I am currently a full-time employee of the State of West Virginia (complete certification below).

It is hereby certified that the services to be performed under this agreement will not interfere with or detract from the full-time duties of the employee and the amount of annual compensation received by _____ (above named vendor) from the State of West Virginia for full-time employment during the current fiscal year will be \$ N/A. The vendor serves as N/A with the title of N/A, certified by _____
(Position)
(Supervisor's Signature)

GENERAL TERMS AND CONDITIONS: The General Terms and Conditions for Agency Delegated Master Terms and Conditions located on the Purchasing Division's website at <http://www.state.wv.us/admin/purchase/TCA.pdf>, ("Terms and Conditions") are hereby made a part of this agreement and are specifically incorporated herein by reference. By signing this agreement, Vendor certifies that it has reviewed the Terms and Conditions, fully understands them, and agrees to be bound by their provisions.

APPROVED BY:

Agency Division of Tourism

Doug D. Carter

(Authorized Signature of Agency)

Commissioner

(Title)

09/09/2013

(Date)

Vendor Old White Charities, Inc.
 by: X Doug D. Carter
27-1569763
(Authorizing Signature)
9-18-2013
(Social Security or FPIW)
(Date)

I 1483 6886

The
Greenbrier.
CLASSIC
State of West Virginia

Invoice #2013-201

The 2013 Greenbrier Classic / Presenting Partner
July 1-7, 2013

\$890,000.00

TOTAL DUE \$890,000.00

Please make check payable to Old White Charities, Inc.
Please return one copy of invoice with remittance.

Hebibi Said, National Director of Sales & Operation
The Greenbrier Classic
300 West Main Street
White Sulphur Springs, West Virginia 24986

THANK YOU.

REPORT ID: WVFA70U0
PAGE 1

STATE OF WEST VIRGINIA
FINANCIAL INFORMATION MANAGEMENT SYSTEM
OFFICE OF THE STATE AUDITOR

10/01/13
09:54:48

BASKET ESSENTIAL
INVOICE COVER SHEET

AUDITOR ENTRY ID: I 5 14836886
WVFIMS DOCUMENT ID: I 14836886

STATE ORGANIZATION: 0304
STATE ORGANIZATION NAME: TOURISM DIVISION WV DEVELOPMENT OFFICE
ORGANIZATION CONTACT: LOARIE BUTCHER
ORGANIZATION ADDRESS: 90 MACCORKLE AVE SW

SO CHARLESTON WV 25303-0000
ORGANIZATION: 0304
ORGANIZATION NAME: TOURISM DIVISION WV DEVELOPMENT OFFICE

DATE PREPARED: 10/01/13
DOCUMENT AMOUNT: 890,000.00
VENDOR INVOICE NUMBER: 2013201
AGENCY COMMITMENT:
AGENCY DOCUMENT:

SPECIAL AUTHORIZATION: 4
OPEN END CONTRACT NUMBER:
DUE DATE: 10/01/13
SPECIAL HANDLING: N
VENDOR NUMBER: 558412
VENDOR NAME: OLD WHITE CHARITIES INC

VENDOR ADDRESS: 300 W MAIN ST

WHITE SULPHUR SPRING WV 24986-

CONTACT PERSON/PHONE: GEORGINA DAVIS 304-957-9339 EXT:
CASH ADVANCE: N BEGIN TRAVEL: / / END TRAVEL: / /

COMMENTS: SPONSORSHIP GREENBRIER CLASSIC
7/1/13-7/7/13

ELECTRONICALLY AUTHORIZED BY: LOARIE BUTCHER
DIRECTOR OF ADMIN

DATE: 2013-10-01

APPROVED BY AUDITOR: _____ DATE: _____

FUND	FY	ORG	ACT	OBJ	GRANT	AMOUNT
3067	2014	0304	618	035		890,000.00
TOTAL INVOICE AMOUNT						890,000.00